VILLA LA VERNE HOMEOWNERS ASSOCIATION
Pool FOB Distribution Form

HOMEOWNER INFORMATION:			
Homeowner Name(s):		Date:	
Onsite/Property Address:			
Offsite Address:			
MAIL POOL FOB TO: **☐ RESIDENT AT PROPERTY ADDRESS ☐ HOMEOWNER OFFSITE ADDRESS**			
Email Address:		Home Phone:	
Cell Phone:		Work Phone:	

TENANT/RESIDENT INFORMATION (*if different from above*):		
Tenant Name:		
Tenant Name:		
Cell Phone:	Home Phone:	Work Phone:

I, _____, hereby request a replacement Pool FOB. There is a $100.00 cost for the replacement Pool FOB plus shipping & handling (contact So Cal Property for current shipping cost). The payment should be made payable to Villa La Verne HOA and can be made by check, money order or cashier's check. Please send the completed form and payment to the below return address. By signing this agreement below, you accept the terms of this contract.

Homeowner Signature: **X**	**Date:**
Print Homeowner Name:	

Return signed form and payment to:
VILLA LA VERNE HOA
c/o So Cal Property Enterprises
1855 Sampson Ave., Corona, CA 92879
(951) 270-3700